Appendix 1

Table 1. Guidelines for patients nursed supine and unconscious

Grade of lagophthalmos	Action
Grade 0 - Lid completely closed	NO ACTION REQUIRED
Grade 1 - Any conjunctival exposure	 EYES NEED LUBRICATING EVERY 4 HOURS Clean off old ointment before putting in new Pull lower lid down and instil ointment onto eye between lower lid and conjunctiva Always check corneal clarity with bright light: IF NOT CLEAR – ALERT MEDICAL STAFF
Grade 2 - Any conjunctival & corneal exposure - MAJOR RISK	 EYES NEED LUBRICATING AND LIDS TAPING Apply ointment as for Grade 1 Close lids, ensure lashes outside eye and lids free of ointment Tape upper lid down with Micropore TM tape horizontally Always check corneal clarity with bright light: IF NOT CLEAR - ALERT MEDICAL STAFF

Table 3. Guidelines for patients nursed prone and unconscious

Grading	Action
MAJOR RISK to eye in all cases	Action EYES NEED LUBRICATING EVERY 4 HOURS AND LIDS TAPING - Clean off old ointment before putting in new - Pull lower lid down and instil ointment onto eye between lower lid and conjunctiva - Close lids, ensure lashes outside eye and lids free of ointment - Tape upper lid down with Micropore TM tape
	 Tape upper lid down with MicroporeTM tape horizontally Always check corneal clarity with bright light: IF NOT CLEAR - ALERT MEDICAL STAFF If eye is swollen preventing lid closure - ALERT MEDICAL STAFF

Table 3. Guidelines for managing a red eye in ICU patients

Clinical features	Action
Eye sticky	- Take swab
	- Use Chloramphenicol ointment 4 TIMES PER DAY to eye
	- Be aware condition is contagious and can be transmitted to other patients
	- IF NOT BETTER IN 24 HOURS – ALERT MEDICAL
	SATFF
Eye not sticky	- Is the cornea clear or does it stain with fluorescein drops?
	- If clear cornea, or simple abrasion, check lubrication schedule and
	consider lid taping
	- If corneal opacity or eye not dry - ALERT MEDICAL STAFF

White line visible inside eye



ALERT MEDICAL STAFF IMMEDIATLEY